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FACSIMILE COVER LETTER

To: Commissioner for Patents
Examiner Le, Dieu-Minh T.
Firm: U.S. Patent and Trademark Office
Art Unit 2114
Facsimile: (571) 273-8300
From: Thomas F. Presson
Date: July 27, 2006
Re: FLH Ref No.: 450100-04654
Serial No: 10/625,144

Number of Pages: 13
(including cover page)

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JUL 27 2006

PATENT
450100-04654IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Minoru Kawahara
 Serial No. : 10/625,144
 Filed : July 23, 2003
 For : DATA PROCESSING APPARATUS HAVING ERROR
 CONCEALMENT FUNCTION
 Examiner : Le, Dicu-Minh T.
 Art Unit : 2114

745 Fifth Avenue
 New York, NY 10151
 Tel: 212-588-0800

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.
☐ The fee has been calculated as shown below.
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rule	(7) Additional Fee
Total claims	9	Minus	** = 20	* 0 x	\$50 (25)	= \$ 0
Independent claims	3	Minus	*** = 3	* 0 x	\$200 (100)	= \$ 0
Total additional fee for this amendment						\$ 0

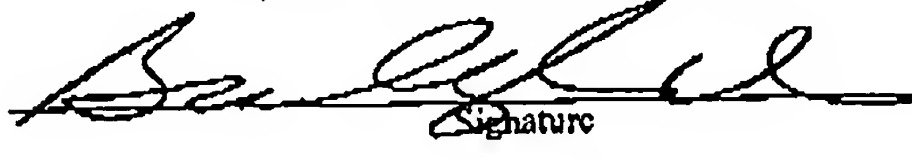
- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
 ** If the highest number of total claims previously paid for is less than 20, write "20" in this space.
 *** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

- ☐ This application contains a multiple dependent claim. The required fee of \$300 (150) has been previously paid ☐, or is paid herewith ☐.
- ☐ This response is being filed within the ___ month following the expiration of the term originally set therefor. This is a petition to request a ___ month extension of time. A check covering the cost of the petition is enclosed.
- ☐ A check in the amount of \$___ is attached, which covers the cost of ☐ additional claims ☐ petition for extension of time.
- ☐ Charge \$___ to Deposit Account No. 50-0320.
- ☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

CERTIFICATE OF FACSIMILE


I hereby certify that this correspondence is being transmitted via
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Barnet Shindlman
 (Name of person signing transmittal)


 Signature
 July 27, 2006
 Date of Signature

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP
 Attorneys for Applicants

By: 
 Thomas F. Presson
 Reg. No. 41,442

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003/013

U.S. Patent Application No. 10/625,144
Reply to Office Action dated April 28, 2006

JUL 27 2006

PATENT
450100-04634

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Minoru Kawahara
Serial No. : 10/625,144
Filing Date : July 23, 2003
For : DATA PROCESSING APPARATUS HAVING ERROR
CONCEALMENT FUNCTION
Art Unit : 2114
Examiner : Le, Dieu-Minh T.
Confirmation No. : 8275

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Barnet Shindlman
(Name of person signing transmittal)


Signature

July 27, 2006
Date of Signature

AMENDMENT UNDER 37 C.F.R. §1.121

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Non-Final Office Action dated April 28, 2006, having a three-month statutory period for response set to expire on July 28, 2006, please amend the above-captioned application as follows.

U.S. Patent Application No. 10/625,144
Reply to Office Action dated April 28, 2006

PATENT
450100-04654

Amendments to the Claims are reflected in the listing of claims, which begins
on page 3 of this paper.

Remarks/Arguments begin on page 8 of this paper.